

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS
EASTERN DIVISION**

In re:

VICTORIA COLEMAN

Case No. 09-07822

Debtor(s)

CHAPTER 13 STANDING TRUSTEE'S FINAL REPORT AND ACCOUNT

Tom Vaughn, chapter 13 trustee, submits the following Final Report and Account of the administration of the estate pursuant to 11 U.S.C. § 1302(b)(1). The trustee declares as follows:

- 1) The case was filed on 03/09/2009.
- 2) The plan was confirmed on 05/07/2009.
- 3) The plan was modified by order after confirmation pursuant to 11 U.S.C. § 1329 on 06/23/2011.
- 4) The trustee filed action to remedy default by the debtor in performance under the plan on 05/02/2011, 09/13/2011, 01/17/2012, 06/20/2012.
- 5) The case was completed on 06/24/2014.
- 6) Number of months from filing to last payment: 64.
- 7) Number of months case was pending: 68.
- 8) Total value of assets abandoned by court order: NA.
- 9) Total value of assets exempted: \$5,395.00.
- 10) Amount of unsecured claims discharged without payment: \$29,116.71.
- 11) All checks distributed by the trustee relating to this case have cleared the bank.

Receipts:

Total paid by or on behalf of the debtor	\$9,679.89
Less amount refunded to debtor	\$279.46

NET RECEIPTS:

\$9,400.43

Expenses of Administration:

Attorney's Fees Paid Through the Plan	\$3,499.00
Court Costs	\$0.00
Trustee Expenses & Compensation	\$528.74
Other	\$0.00

TOTAL EXPENSES OF ADMINISTRATION: **\$4,027.74**

Attorney fees paid and disclosed by debtor: \$1.00

Scheduled Creditors:

Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. Paid
ACS	Unsecured	2,533.00	NA	NA	0.00	0.00
AMERILOAN	Unsecured	250.00	NA	NA	0.00	0.00
ASSET ACCEPTANCE LLC	Unsecured	673.00	685.48	685.48	68.55	0.00
CITY OF CHICAGO DEPT OF REVENUE	Unsecured	1,000.00	1,027.20	1,027.20	102.72	0.00
CITY OF MAYWOOD	Unsecured	35.00	NA	NA	0.00	0.00
COMCAST	Unsecured	340.00	NA	NA	0.00	0.00
COMMONWEALTH EDISON	Unsecured	280.00	288.46	288.46	28.85	0.00
COMPUCREDIT CORPORATION	Unsecured	658.00	658.46	658.46	65.85	0.00
CORPORATE AMERICA FAMILY CU	Unsecured	NA	113.37	113.37	11.34	0.00
CORPORATE AMERICA FAMILY CU	Unsecured	1,485.00	1,504.88	1,504.88	150.49	0.00
GREAT LAKES BANK	Unsecured	8,400.00	NA	NA	0.00	0.00
HONOR FINANCE	Secured	3,863.00	3,750.80	3,750.80	3,750.80	371.56
HONOR FINANCE	Unsecured	NA	440.20	440.20	44.02	0.00
HSBC/CARSON	Unsecured	290.00	NA	NA	0.00	0.00
ISAC	Unsecured	2,666.00	2,671.26	2,671.26	267.13	0.00
JEFFERSON CAPITAL SYSTEMS	Unsecured	1,116.00	1,116.66	1,116.66	111.67	0.00
LOAN SHOP ONLINE	Unsecured	400.00	NA	NA	0.00	0.00
LOYOLA UNIVERSITY HEALTH SYS	Unsecured	376.00	NA	NA	0.00	0.00
LOYOLA UNIVERSITY HEALTH SYS	Unsecured	137.00	NA	NA	0.00	0.00
LOYOLA UNIVERSITY HEALTH SYS	Unsecured	132.00	NA	NA	0.00	0.00
LOYOLA UNIVERSITY HEALTH SYS	Unsecured	120.00	NA	NA	0.00	0.00
LOYOLA UNIVERSITY HEALTH SYS	Unsecured	94.00	NA	NA	0.00	0.00
LOYOLA UNIVERSITY HEALTH SYS	Unsecured	70.00	NA	NA	0.00	0.00
LOYOLA UNIVERSITY HEALTH SYS	Unsecured	54.00	NA	NA	0.00	0.00
LOYOLA UNIVERSITY PHY NS FOUN	Unsecured	397.00	NA	NA	0.00	0.00
LOYOLA UNIVERSITY PHY NS FOUN	Unsecured	190.00	NA	NA	0.00	0.00
LOYOLA UNIVERSITY PHY NS FOUN	Unsecured	151.00	NA	NA	0.00	0.00
LOYOLA UNIVERSITY PHY NS FOUN	Unsecured	123.00	NA	NA	0.00	0.00
LOYOLA UNIVERSITY PHY NS FOUN	Unsecured	82.00	NA	NA	0.00	0.00
LOYOLA UNIVERSITY PHY NS FOUN	Unsecured	82.00	NA	NA	0.00	0.00
LOYOLA UNIVERSITY PHY NS FOUN	Unsecured	59.00	NA	NA	0.00	0.00

Scheduled Creditors:

Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. Paid
LOYOLA UNIVERSITY PHYSICIANS F	Unsecured	556.00	1,190.89	1,190.89	119.09	0.00
LVNV FUNDING	Unsecured	1,000.00	667.43	667.43	66.74	0.00
NICOR GAS	Unsecured	936.00	1,005.86	1,005.86	100.59	0.00
PEOPLES GAS	Unsecured	2,000.00	NA	NA	0.00	0.00
PEOPLES GAS	Unsecured	774.00	NA	NA	0.00	0.00
PRA RECEIVABLES MANAGEMENT	Unsecured	563.00	608.71	608.71	60.87	0.00
QUICK CASH	Unsecured	400.00	NA	NA	0.00	0.00
TCF BANK	Unsecured	83.00	NA	NA	0.00	0.00
TOTAL CARD	Unsecured	324.00	324.18	324.18	32.42	0.00
VILLAGE OF BELLWOOD	Unsecured	200.00	200.00	200.00	20.00	0.00
WESTLAKE HOSPITAL EMERGENCY	Unsecured	292.00	NA	NA	0.00	0.00

Summary of Disbursements to Creditors:

	Claim Allowed	Principal Paid	Interest Paid
Secured Payments:			
Mortgage Ongoing	\$0.00	\$0.00	\$0.00
Mortgage Arrearage	\$0.00	\$0.00	\$0.00
Debt Secured by Vehicle	\$3,750.80	\$3,750.80	\$371.56
All Other Secured	\$0.00	\$0.00	\$0.00
TOTAL SECURED:	\$3,750.80	\$3,750.80	\$371.56
Priority Unsecured Payments:			
Domestic Support Arrearage	\$0.00	\$0.00	\$0.00
Domestic Support Ongoing	\$0.00	\$0.00	\$0.00
All Other Priority	\$0.00	\$0.00	\$0.00
TOTAL PRIORITY:	\$0.00	\$0.00	\$0.00
GENERAL UNSECURED PAYMENTS:	\$12,503.04	\$1,250.33	\$0.00

Disbursements:

Expenses of Administration	<u>\$4,027.74</u>
Disbursements to Creditors	<u>\$5,372.69</u>
TOTAL DISBURSEMENTS :	<u>\$9,400.43</u>

12) The trustee certifies that, pursuant to Federal Rule of Bankruptcy Procedure 5009, the estate has been fully administered, the foregoing summary is true and complete, and all administrative matters for which the trustee is responsible have been completed. The trustee requests a final decree be entered that discharges the trustee and grants such other relief as may be just and proper.

Dated: 11/20/2014

By: /s/ Tom Vaughn

Trustee

STATEMENT: This Unified Form is associated with an open bankruptcy case, therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.